## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

SV1920030022US/

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
<u></u>	TAL CLAINA	<u> </u>	(Column 1)		(Column 2)		] ]	TYPE		OR	R SMALL ENTI		
TOTAL CLAIMS			3b					RATE	FEE	]	RATE	FEE	
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TO	TAL CHARGE	ABLE CLAIMS	30 mi	nus 20=	* 10			X\$ 9=		OR	X\$18=	180	
INI	DEPENDENT C	CLAIMS	3 m	inus 3 =				X43=		OR	X86=	···	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, e					"0" in c	olumn 2	L	TOTAL		OR	TOTAL	900	
CLAIMS AS AMENDED - PART II									Ļ	]	OTHER		
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##	<u> </u>	=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	01.4414			X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MI	JUIN DE	PENDENI	CLAIM		\	+145=		OR	+290=		
								TOTAL			TOTAL ADDIT. FEE		
		(Column 1)		(Colum	ın 2)	(Column 3)	Al	ODIT. FEE		,	ADDII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	÷	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=	·	OR	X86=		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=		
							 ^F	TOTAL DIT. FEE		OR .	TOTAL ODIT, FEE		
	N	(Column 1)		(Colum	n <sup>.</sup> 2)	(Column 3)	AL	On ree		•	ODII. FEEL		
31		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER JSLY	PRESENT EXTRA			ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	L	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										<del></del> +		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								145=		OR L	+290= TOTAL		
** [1			,			** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							
***	the "Highest Nur	nber Previously Pai mber Previously Pa	id For' IN THIS id For' IN THIS	SPACE is I	ess than less than	20, enter "20." 3, enter "3 "	. ADI	DIT. FEE		OR A	DDIT. FEE		